Form **8871** (July 2000)

Political Organization Notice of Section 527 Status

OMB No. 1545-1693

Department of the Treasur

Pa	rt I General Information						_
1	Name of organization	for	Mayor	······································	 ,,,	Employer identification number 68 0436868	er
2	Mailing address (P.O. Box or number, \$958 Ivanoch	street, and roc	om or suite nun	nber)			
	City or town, state, and ZIP code	CA .	95624	***		, <u> </u>	_
3	E-mail address of organization Vona @ earthli	nk.net					_
4a	Name of custodian of records		4b Custod	ian's address		<i>a</i> ,	_
	10			8958 IV	anpa	h (7.	
	Vona L. Cop	P		EIK Grow	re i	CA 95624	
5a	Name of contact person	•	5b Contac	t person's address	•		_
	Vona L. Co	90		8958 IV	4		•••
6	Business address of organization (if di	<u> </u>	L ailing address s	hown above). Number,	street, and	7A 95624 room or suite number	
	City or town, state, and ZIP code						_
Pa	rt II Purpose					· · · · · · · · · · · · · · · · · · ·	_
7	Describe the purpose of the organizat	ion					_
				*		***************************************	
				af So			
Pa	It III List of All Related Ent	ities (see ins	structions)				_
8a	Name of related entity	8b Relations	ship	8c Address			_
						RECEIVED	
						AUG 0.2.2000 (2)	
						Jabelle, 01	•••
For I	Paperwork Reduction Act Notice, see	page 4.		Cat. No. 30405V		Form 8871 (7-20	00)





9a Name	rectors, and Highly Co 9b Title	mpensated Employees (see instructions) 9c Address
Joe Genshlea	candidate	400 Capitol Mall, Ste.1100 Sacramento, CA 95814
Cecilia Delury	Treasurer	One Capital Mall, Ste. 240 Sacramento, CA 95814
Vona Copp	Asst. Treas.	8958 Ivanpah Ct. EIK Grove, CA 95624
Under penalties of perjury, I decing Revenue Code, and that I have expense it is true, correct, and complete. Sign Signature of authorized of	xamined this notice, including according to the second sec	Part I is to be treated as an organization described in section 527 of the Internal ompanying schedules and statements, and to the best of my knowledge and belief,